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| POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 09/724,416 |
| | Filing Date | 11/28/2000 |
| | First Named Inventor | JIN, Hong |
| | Title | Recombinant RSV Virus Expression Systems ... |
| | Art Unit | 1648 |
| | Examiner Name | LUCAS, Zachariah |
| | Attorney Docket Number | NS202CP1 |

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

36577

OR

☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

| Practitioner(s) Name | Registration Number |
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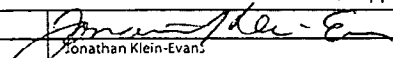
☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-------------------|---|-----------|-------------------|
| Signature |  | Date | 11-13-08 |
| Name | Jonathan Klein-Evans | Telephone | +1 (301) 398-4156 |
| Title and Company | Vice President, Intellectual Property, MedImmune, LLC | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.

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